

Stabilization Grant – Quarterly Update

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Last Reviewed:7/6/2023

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Overview

This job aid will provide the steps to view, add, update, and submit records for the **North Carolina Early Childhood Stabilization Grant Relief Funding**. Ongoing quarterly updates are required to stay in compliance with the terms of the program. The updates should be completed by each deadline posted on the Provider Portal.



Key items:

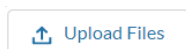
- Status bar is used to track the progression and completion of applications and updates.



- The Save and Continue button is used to save entered data and advance to the next section.



- [Hyperlink](#) – appears light blue and will provide additional information or navigation.
- Asterisk * – used to denote required information.
- Toggles  – click to see selectable options.
- Radio button  – used to select from a list of items.
- The Upload Files button is used to upload files.



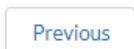
- The Error pop-up message is used to warn about missing information or data entry error.



- The Success pop-up message is used to affirm that a document is uploaded or the update was completed.



- The Previous button is used to return to a previous section.



- The Next Button is used to advance to the next section.

Next

- The Submit button is used to submit the application after all entries are completed.

Submit

Step by Step Instructions

Log In/Logging Out

- Starting on the NC FAST Program Portal Welcome Page, click the **Current Program: Stabilization Grants Click here to Login** hyperlink, located under Provider Portal.

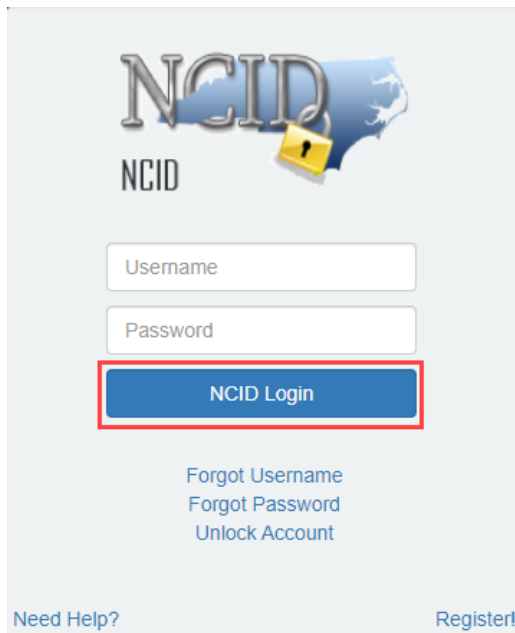
Welcome to North Carolina Families Accessing Services through Technology Portal
Below are the Program Portals available to login.

Provider Portal

Current Program: Stabilization Grants Click [here to Login](#)

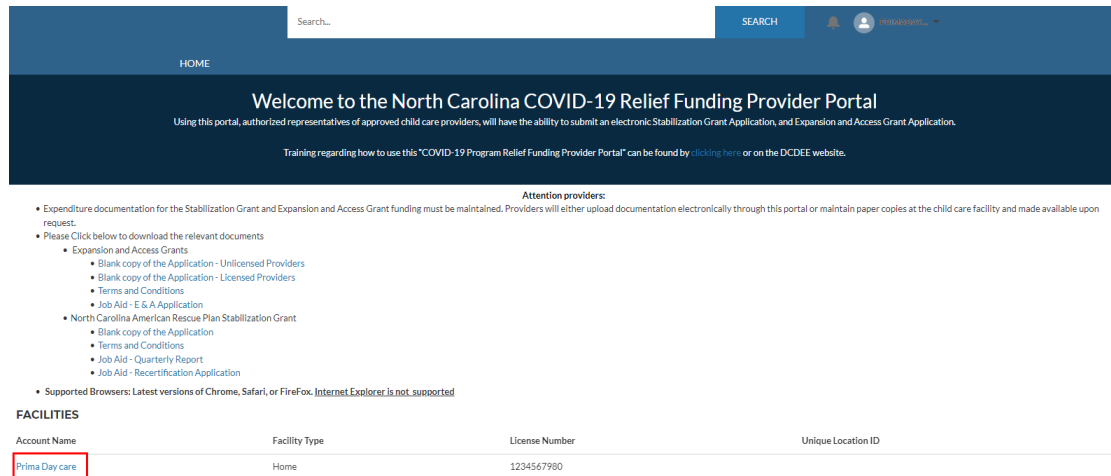
Energy Portal
Coming Soon

- The NCID page displays, Enter your *Username* and *Password* then click **NCID Login** to log in.



Note: For assistance creating and linking your NCID, please refer to the *Provider Job Aid: Creating and Linking Your NCID*.

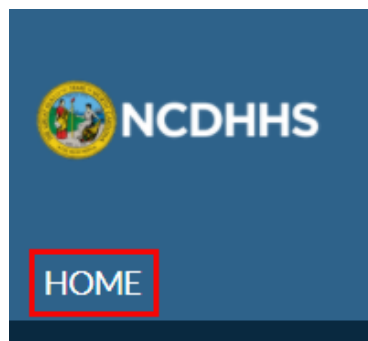
- The COVID-19 Relief Funding Welcome page displays. A list of all the facilities that the applicant is linked to is shown. Account Name, Facility Type, License Number, Unique Location ID are listed for each facility.



Account Name	Facility Type	License Number	Unique Location ID
Prima Day care	Home	1234567980	

Notes:

- Review the list of facilities (if more than one is listed) and Account information displayed for each facility prior to beginning the updates.
 - If the facility is not listed correctly, or displays any errors, contact the DCDEE Customer Service Unit at 1-800-859-0829, select Option 2, (919) 814-6300, select option 2, or DCDEE_support@dhhs.nc.gov
- To return to the Welcome page from any section of the Quarterly Update, click the **Home** button located in the upper right corner.

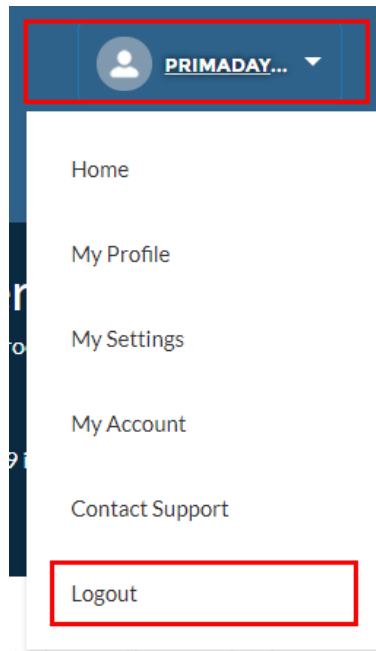


- To exit, click the **NCID Username** drop-down (located in the top right corner) then select **Logout**.



NC FAST

North Carolina Families Accessing
Services through Technology

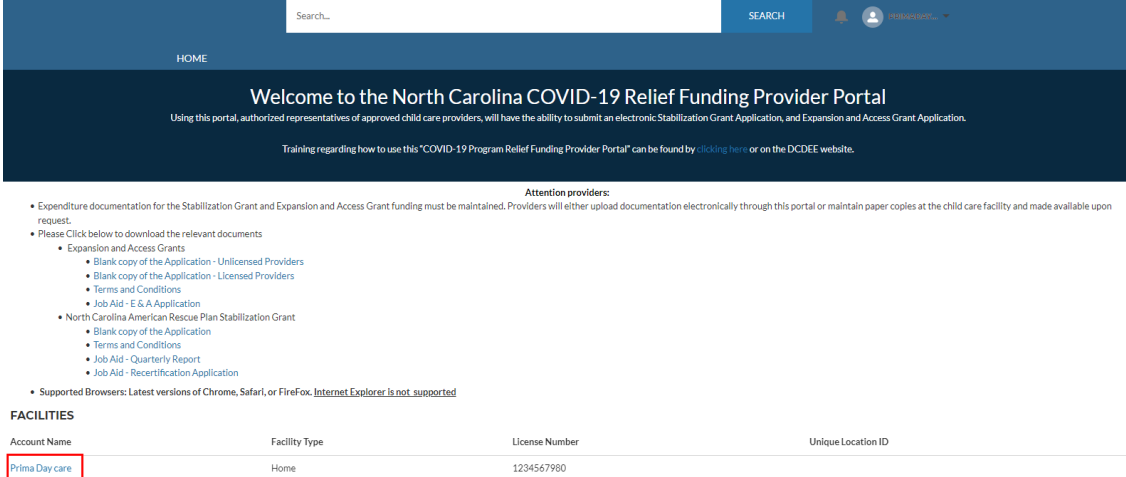


Note: Close the application completely and logout when there is a need to gather other information. Login to restart the process. The initial application saves any information gathered in the previous session if you advanced to the next screen. If you encounter an error message, please [click here](#).

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Navigating to Stabilization Grant home page

1. Starting on the Welcome page, select a facility by clicking the **account name** hyperlink under **FACILITIES**.



Search...

SEARCH

HOME

Welcome to the North Carolina COVID-19 Relief Funding Provider Portal

Using this portal, authorized representatives of approved child care providers, will have the ability to submit an electronic Stabilization Grant Application, and Expansion and Access Grant Application.

Training regarding how to use this "COVID-19 Program Relief Funding Provider Portal" can be found by [clicking here](#) or on the DCDEE website.

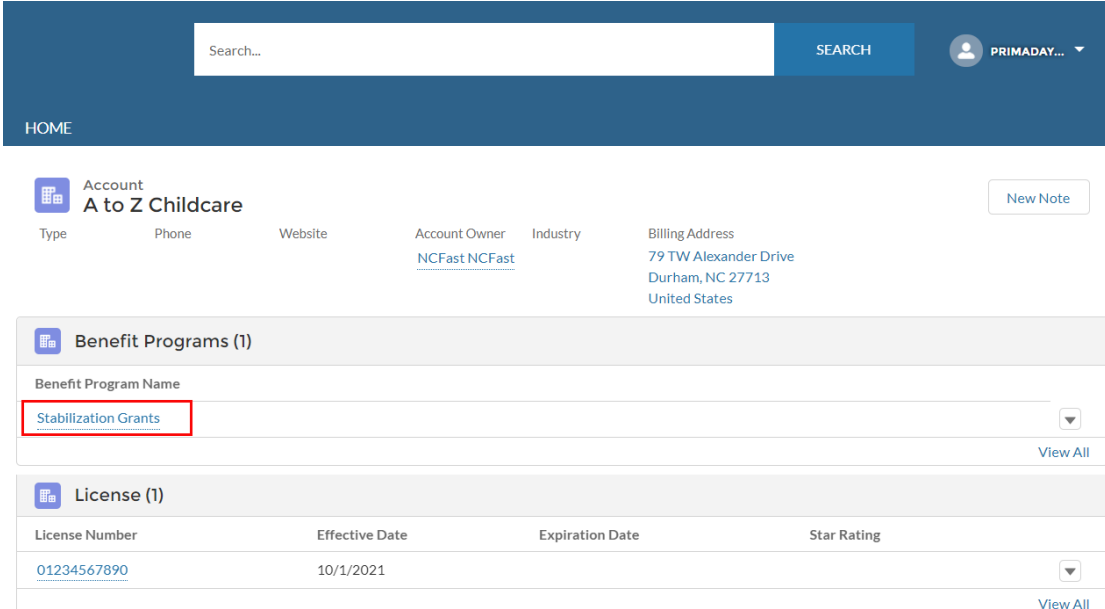
Attention providers:

- Expenditure documentation for the Stabilization Grant and Expansion and Access Grant funding must be maintained. Providers will either upload documentation electronically through this portal or maintain paper copies at the child care facility and made available upon request.
- Please Click below to download the relevant documents
 - Expansion and Access Grants
 - Blank copy of the Application - Unlicensed Providers
 - Blank copy of the Application - Licensed Providers
 - Terms and Conditions
 - Job Aid - E & A Application
 - North Carolina American Rescue Plan Stabilization Grant
 - Blank copy of the Application
 - Terms and Conditions
 - Job Aid - Quarterly Report
 - Job Aid - Recertification Application
- Supported Browsers: Latest versions of Chrome, Safari, or Firefox. Internet Explorer is not supported

FACILITIES

Account Name	Facility Type	License Number	Unique Location ID
Prima Day care	Home	1234567980	

2. The Home page displays. Click the **Stabilization Grants** hyperlink under the Benefit Program Name.



Search...

SEARCH

PRIMADAY...

HOME

Account
A to Z Childcare

Type Phone Website Account Owner Industry Billing Address

NCFast NCFast 79 TW Alexander Drive
Durham, NC 27713
United States

Benefit Programs (1)

Benefit Program Name

Stabilization Grants

View All

License (1)

License Number	Effective Date	Expiration Date	Star Rating
01234567890	10/1/2021		

View All

3. The Benefits Program Stabilization Grants page displays.

Benefit Program
Stabilization Grants



Please [Click Here](#) to download a blank Staff Questionnaire document.
This can be printed and used to collect staff information, manually, from the employees.

✓
Qtlly Update Q1
Qtlly Update Q2
Recertification 1
Qtlly Update Q3
Qtlly Update Q4
Recertification 2
Qtlly Update Q5
Qtlly Update Q6
Completed

Your Quarterly Update window for Quarter 1 (10/1/2021 - 12/31/2021) is now **OPEN**.
Last Date to complete is 1/11/2022, 5:00 PM ET
Please click next to continue

Next

Applications (2)
2 items • Updated 7 minutes ago

	Created By	Created Date	Last Modified By	Last Modified Date	Status	Record Type
1		10/28/2021, 9:00 AM		12/28/2021, 5:01 PM	Approved	Stabilization Grants - Initial Application
2		12/28/2021, 7:58 PM		12/29/2021, 4:08 PM	Submitted	Stabilization Grants - Monthly Updates

[View All](#)

Notes:

- A Progress Bar will display to show which task that have been completed.
- All quarterly updates shall be completed by deadline posted on the Stabilization Grants home page.

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Initiating Quarterly Update

1. Starting on the Benefits Program Stabilization Grants page, click **Next**.

Benefit Program
Stabilization Grants



Please [Click Here](#) to download a blank Staff Questionnaire document.
This can be printed and used to collect staff information, manually, from the employees.

☒ Q1 Update Q1
 ☐ Q1 Update Q2
 ☐ Recertification 1
 ☐ Q1 Update Q3
 ☐ Q1 Update Q4
 ☐ Recertification 2
 ☐ Q1 Update Q5
 ☐ Q1 Update Q6
 ☐ Completed

Your Quarterly Update window for Quarter 1 (10/1/2021 - 12/31/2021) is now OPEN.
Last Date to complete is 12/15/2021, 5:00 PM ET
Please click next to continue

Next

Applications (2)
2 items • Updated 7 minutes ago

	Created By	Created Date	Last Modified By	Last Modified Date	Status	Record Type
1	[User Icon]	10/28/2021, 9:00 AM	[User Icon]	12/28/2021, 5:01 PM	Approved	Stabilization Grants - Initial Application
2	[User Icon]	12/28/2021, 7:58 PM	[User Icon]	12/29/2021, 4:08 PM	Submitted	Stabilization Grants - Monthly Updates

[View All](#)

2. Section I. Program Information page displays.

I. Program Information

Child Care Program Name: Prima Day care

State Child Care Licensing Number: 1234567980

* Have you had any temporary closures in the past quarter due to COVID-19?
☐ Yes
☒ No

What is your current child enrollment by age?

* Under 1 Year Olds: 10

* 1 Year Olds: 10

* 2 Year Olds: 10

* 3 Year Olds: 10

* 4 Year Olds: 10

* 5 Year Olds: 6

* School-Aged: 6

* Do you have Commercial General Liability Insurance?
☒ Yes
☐ No

* Commercial general liability insurance cost: \$900

* Provide coverage limits: \$1,000,000

* Did you use any Fixed Costs and Family funds this quarter?
☐ Yes
☐ No

Save and Continue

Notes:

- This initiates the Updating process.
- Prepopulated information is gathered from the approved Stabilization Grants application, subsequent monthly updates, the Regulatory System and NC FAST.

- Some questions only require a review to ensure that the information displayed is valid.
- Questions with asterisk (*) denote required information must be entered to advance to the next section.
- A *Draft* status displays under the status column located in the Applications section once the quarterly update for the Stabilization Grant application is initiated.

Applications (3) 3 items • Updated 20 minutes ago						
Created By	Created Date	Last Modified Date	Status	Record Type		
1		10/28/2021, 9:00 AM	12/28/2021, 5:01 PM	Approved	Stabilization Grants - Initial Application	
2		12/28/2021, 7:58 PM	12/29/2021, 4:08 PM	Submitted	Stabilization Grants - Monthly Updates	
3		1/13/2022, 11:47 AM	1/13/2022, 12:07 PM	Draft	Stabilization Grants - Quarterly Updates	

[View All](#)

- Review the pre-populated information under Child Care Program Name and State Child Care Licensing Number.

Child Care Program Name:	State Child Care Licensing Number:
Childcare	01-123456789

- Select the applicable radio button for “Have you had any temporary closures in the past quarter due to COVID-19?”.

*** Have you had any temporary closures in the past quarter due to COVID-19?**

☒ Yes
☐ No

- When **Yes** is selected, “Please provide dates of closure:” displays.
 - Enter applicable date(s).

*** Please provide dates of closure:**

- When Yes is selected, “Please specify if the entire facility or classroom was closed?” displays.
 - Select the applicable radio button.

*** Please specify if entire facility or classroom was closed?**

- ☐ Classroom
☐ Facility

5. Review and update “What is your current child enrollment age?”

What is your current child enrollment by age?

* Under 1 Year Olds:

0

* 1 Year Olds:

1

* 4 Year Olds:

0

* 5 Year Olds:

5

Notes:

- Prepopulated child enrollment is gathered from the approved Stabilization Grants application, previous monthly updates.
- A message will display when the total current enrollment is 0.

What is your current child enrollment by age?

* Under 1 Year Olds:

0

* 1 Year Olds:

0

* 2 Year Olds:

0

* 4 Year Olds:

0

* 5 Year Olds:

0

* School-Aged:

0

Total current child enrollment is ZERO. Please check before you continue.

6. Review and update if needed, “Do you have Commercial General Liability Insurance?”

*** Do you have Commercial General Liability Insurance?**

- ☒ Yes
☐ No

* Commercial general liability insurance cost

\$900

* Provide coverage limits:

\$1,000,000

Note: If **Yes** was selected in the Initial Application or Monthly Updates, this information may be pre-populated.

7. Review and answer, “Did you use any Fixed Costs and Family funds this quarter? “. Click **Save and Continue**.

*** Did you use any Fixed Costs and Family funds this quarter?**

☐ Yes

☐ No

Save and Continue

Note: If “No” is selected, skip to *Compensation Supports* section by [clicking here](#).

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Fixed Cost and Family Grants

1. Section II

II. Fixed Costs and Families Grant

* How have you used the Stabilization Fixed Costs Grants during the past quarter? Please select all that apply.

☐ Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance

☐ PPE, cleaning and sanitation supplies and services, or training and professional development related to health and safety practices

☐ Purchases of or updates to equipment and supplies to respond to COVID-19

☐ Goods and services necessary to maintain or resume child care services

☐ Mental health supports for children and employees

☐ Teacher and staff recruitment

☐ Teacher and staff compensation

☐ Copayments and tuition payments for families with children enrolled in the program

☐ Repayment of costs incurred after the declaration of the public health emergency on January 31, 2020 for any of the categories listed above.

Please upload and retain documentation for each expenditure (statements, invoices, receipts, payroll statements, bank statements, account receivable documentation, etc.)

All documents must be retained for up to 7 years.

Upload Files

Or drop files

Previously Loaded Files List

Previous

Save and Continue

Fixed Cost and Families Grant section displays.

2. Review and update the information for, “How have you used the Stabilization Fixed Cost Grant during this past quarter? Please select all that apply.”

II. Fixed Costs and Families Grant

* How have you used the Stabilization Fixed Costs Grants during the past quarter? Please select all that apply.

- ☐ Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance
- ☐ PPE, cleaning and sanitation supplies and services, or training and professional development related to health and safety practices
- ☐ Purchases of or updates to equipment and supplies to respond to COVID-19
- ☐ Goods and services necessary to maintain or resume child care services
- ☐ Mental health supports for children and employees
- ☐ Teacher and staff recruitment
- ☐ Teacher and staff compensation
- ☐ Copayments and tuition payments for families with children enrolled in the program
- ☐ Repayment of costs incurred after the declaration of the public health emergency on January 31, 2020 for any of the categories listed above.
- ☐ Other

Please upload and retain documentation for each expenditure (statements, invoices, receipts, payroll statements, bank statements, account receivable documentation, etc.) All documents must be retained for up to 7 years.

 Upload Files Or drop files

Previous

Save and Continue

- a. Each checkbox selected will yield another question based on category.
- b. Select the applicable radio button for the question, *"Please select the monetary range for each selected category of how much funds were spent during this past quarter."*

II. Fixed Costs and Families Grant

* How have you used the Stabilization Fixed Costs Grants during the past quarter? Please select all that apply.

- ☒ Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance
- ☐ PPE, cleaning and sanitation supplies and services, or training and professional development related to health and safety practices
- ☐ Purchases of or updates to equipment and supplies to respond to COVID-19
- ☐ Goods and services necessary to maintain or resume child care services
- ☐ Mental health supports for children and employees
- ☐ Teacher and staff recruitment
- ☐ Teacher and staff compensation
- ☐ Copayments and tuition payments for families with children enrolled in the program
- ☐ Repayment of costs incurred after the declaration of the public health emergency on January 31, 2020 for any of the categories listed above.
- ☐ Other

Please select the monetary range for each selected category of how much funds were spent during this past quarter.

* Rent/Mortgage/Utilities

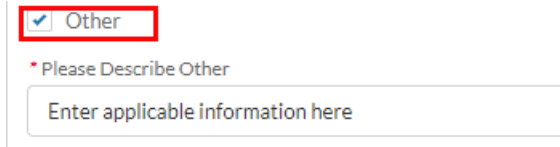
- ☐ \$0 - \$2,500
- ☒ \$2,501 - \$5,000
- ☐ \$5,001 - \$7,500
- ☐ \$7,501 - \$10,000
- ☐ \$10,001 - \$15,000
- ☐ \$15,001 - \$25,000
- ☐ \$25,001 - \$50,000
- ☐ \$50,001 - \$100,000
- ☐ \$100,001 - \$200,000
- ☐ Above \$200,000

Please upload and retain documentation for each expenditure (statements, invoices, receipts, payroll statements, bank statements, account receivable documentation, etc.) All documents must be retained for up to 7 years.

 Upload Files Or drop files

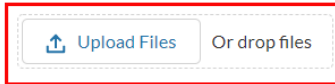
Note: Based on the category each fixed cost is based on, use the [DCDEE Fixed Cost](#) table for guidance.

3. When Other is selected, the **“Please describe Other”** entry field displays.



4. Click the **Upload Files** button, to upload documentation for each expenditure claimed.

Please upload and retain documentation for each expenditure (statements, invoices, receipts, payroll statements, bank statements, account receivable documentation, etc.)
All documents must be retained for up to 7 years.

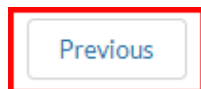


Notes:

- For step-by-step instruction to upload a document [click here](#).
 - At least one document must be uploaded to advance to the next section.
 - PDF files are preferred.
 - A maximum of 5MB or 5000KB can be uploaded.
 - Document can only be uploaded to the Quarterly Update before you submit Update.
 - Previous documentation from past updates is acceptable if there has not been any change in circumstances for the facility.
 - Please review your documentation carefully and make sure you have uploaded accurate information because once submitted you will be unable to changes or add additional documents.
 - When **Submit** button is selected you will be unable to make any changes or add documents to the Quarterly Updates.
5. After all required documents are uploaded, in the lower right corner, click **Save and Continue**.



Note: The **Previous** button is present and allows access to the previous section.



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Compensation Supports

1. Section III. Compensation Supports displays.

III. Compensation Supports

* Please identify the way in which the funds were used for personnel costs

☐ Option 1: Bonuses.
☐ Option 2: Increase Base pay and/or Benefits.

Please upload the following two documents

- A copy of your bonus payment plan and/or your salary scale and increased compensation/benefits plan.
- Payroll documentation to show compensation supports expenditures.

Or drop files

Previously Loaded Files List

2. Select the **applicable** radio button for the question “Please identify the way in which the funds were used for personnel costs”.

III. Compensation Supports

*** Please identify the way in which the funds were used for personnel costs**

☐ Option 1: Bonuses.
☐ Option 2: Increase Base pay and/or Benefits.

3. When Option 1: Bonuses is selected, skip to step 6 to upload documents.

* If your child care program received additional designated grant funds for compensation and benefits, please identify the way in which the funds were used for personnel costs

☒ Option 1: Bonuses.
☐ Option 2: Increase Base pay and/or Benefits.

4. When Option2: Increase Base pay and/or Benefits is selected, other entry fields display.

5. Enter a numeric value for each entry field.

* If your child care program received additional designated grant funds for compensation and benefits, please identify the way in which the funds were used for personnel costs

☐ Option 1: Bonuses.

☒ Option 2: Increase Base pay and/or Benefits.

* Please enter Increased Base Pay Percentage

* Please enter Benefits Percentage

Notes:

- Enter a value between 0 to 100.
- Values should add up to 100 percent of designated grant funds to increase Base Pay/Benefits used for personnel.
- (i.e., If you received \$1000 for increased base pay/benefits and paid \$500 toward salaries and \$500 towards benefits, then the percentages would be 50{Base pay} and 50{Benefits}).

6. Upload the required documents supporting the payroll compensation and/or bonuses. Click **Save and Continue**.

Please upload the following two documents

- a copy of your bonus payment plan and/or your salary scale and increased compensation plan.
- payroll documentation to show compensation supports expenditures.

 Or drop files

Previous

Save and Continue

Notes:

- Directions to upload documents [click here](#).
- At least two documents are required to be uploaded to advance to the next section.
- Previous documentation from past updates is acceptable if there has not been any change in circumstances for the facility.

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Unspent Funds

1. Section IV. Unspent Funds displays.

IV. Unspent Funds

* Do you have any unspent funds?

- ☐ Yes
☒ No

Previous

Save and Continue

2. Select the applicable radio button for the question “*Did you have any unspent funds?*”

IV. Unspent Funds

* Do you have any unspent funds?

- ☐ Yes
☒ No

Previous

Save and Continue

Notes:

- If *No* is selected, click **Save and Continue** to advance to the next section.
 - If *Yes* is selected an additional entry field will display.
3. Review and update any applicable information for the question “*Please identify the amount of unspent funds.*”

* Please identify the amount of unspent funds

\$440

Note: Numerical dollar amounts only are entered here.

4. Select the applicable radio button for “*Have you developed a plan for unspent funds?*”

* Have you developed a plan for unspent funds?

- ☐ Yes
☐ No

- c. If *No* is selected, answer the field entry, “*Describe the plan and timeline for expenditure of these funds.*”

* Describe the plan and timeline for expenditure of these funds

Previous Save and Continue

d. If Yes is selected, select **data file** and upload plan.

* Have you developed a plan for unspent funds?

☒ Yes

☐ No

Upload Files Or drop files

Notes: To obtain the directions to upload documents, [click here](#).

e. Click **Save and Continue**.

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Certifications

1. Section V. Certification displays. Carefully review each statement and select the applicable radio button.

V. Certifications

For each employee (including lead teachers, teacher assistants, aides, administrators, and staff that are employed by the child care provider to work in transportation, food preparation, and any other staff that the provider employs), the child care provider must pay at least the same amount in weekly wages and maintain the same benefits (such as health insurance and retirement, if applicable) for the duration of the grant. In addition, the child care provider will not involuntarily furlough employees from the date of application submission through the duration of the grant period.

* Do you remain in compliance with this requirement?

☒ Yes

☐ No

2. Select the **applicable** radio button for the question “Do you remain in compliance with this requirement?”

* Do you remain in compliance with this requirement?

☒ Yes

☐ No

3. Select the applicable radio button for the question “Do you remain in compliance with this federal requirement?”

* Do you remain in compliance with this federal requirement?

☒ Yes

☐ No

Note: If *No* is selected, answer the following question, “*Reason why the requirement is not met*” in the entry field.

* Do you remain in compliance with this federal requirement?

☐ Yes

☒ No

* Reason why the requirement is not met

4. Select the applicable radio button for the question “*Do you remain in compliance with this federal requirement?*”
5. Select the applicable radio button for the question “*Is your child care facility providing relief from copayments and/or tuition payments for families enrolled in the program?*”

* Is your child care facility providing relief from copayments and/or tuition payments for families enrolled in the program?

☒ Yes

☐ No

* Please describe the relief efforts your program has employed.

Are there other challenges or information that you would like to share about the current operation of your child care program?

Previous

Save and Continue

Notes:

- If *Yes* is selected answer the following question, “*Please describe the relief efforts your program has employed*” in the entry field.
- “*Are there other Challenges or information that you would like to share about the current operation of your child care program?*” is optional to answer.

6. Click **Save and Continue**.

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Workforce Updates

1. Section VI. Workforce Updates displays.

VI. Workforce Updates

* Have there been any changes to your workforce during the past quarter?

☐ Yes

☐ No

Previous

Submit

2. Select the applicable radio button for the question “Have there been any changes to your workforce during the past quarter?”

VI. Workforce Updates

* Have there been any changes to your workforce during the past quarter?

☐ Yes

☐ No

Previous

Submit

Notes:

- If *No* is selected, make sure all documents are uploaded. Click **Submit**.

VI. Workforce Updates

* Have there been any changes to your workforce during the past quarter?

☐ Yes

☐ No

Previous

Submit

- Once the update is submitted documents cannot be uploaded.
- Proceed to the *Submitted Updates* section by [clicking here](#).

3. If *Yes* is selected, additional instructions display. Click **Next**.

VI. Workforce Updates

* Have there been any changes to your workforce during the past quarter?

☒ Yes

☐ No

In the next screen,

a. Please update the teaching/non-teaching staff information in the table to reflect changes.

b. Please add information for any new hires.

c. Deactivate any teaching/non-teaching staff that may have left your program.

Previous

Next

Notes:

- The Next button will only appear once “Yes” is selected.

- This button will allow adding, updating, or deactivating employees.
- All employee updates must be made before clicking **Submit**.

4. The Program Staff page displays.

Please [Click Here](#) to download a blank Staff Questionnaire document.
This can be printed and used to collect staff information, manually, from the employees.

Name	Active	Title	Email	Type	Position	Start Da...	Start Da...	Education	Educati...	B-K Lice...	Employ...
<input type="radio"/> Mother E Hubbard	✓	Director	mhubbar...	Non-Teaching	Owner	2016-05-01		Master's Degree or higher	PhD. Bioengineering	No	Full Time
<input type="radio"/> Mother Hen	✓	Teacher	mhen@w...	Teaching	Lead Teacher/Teacher	2016-08-01	2014-01-01	Bachelor's Degree	Early Childhood	Yes	Full Time
<input type="radio"/> Mother Goose	✓	Lead Teacher	mgoose@...	Teaching	Lead Teacher/Teacher	2011-10-01	1995-01-01	Master's Degree or higher	Early Childhood	Yes	Full Time
<input type="radio"/> Jack Benimble	✓	Teacher Assistant	jbenimble...	Teaching	Teacher Assistant	2018-05-01	2014-01-01	NC Early Childhood Certificate (12-18 semester hours of higher education)	Early Childhood		Part Time

Have you completed all staffing updates? Once you hit submit you will not be able to make any additional updates to your workforce.

Notes:

- All staff updates must be made before the **Submit** button is selected.
- PDF form can be downloaded and printed to give to each staff member to fill out prior. [Click here](#) for guidance to download a document.
- Enter applicable information to update both full-time and part-time staff.

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Adding an Employee

1. Click the **Add New Employee** hyperlink to enter program staff members (Administrative, Teaching, and Non-Teaching).

Please [Click](#)
This can be printed a

Name	Active	Title	Email	Type
<input type="radio"/> Mother E Hubbard	✓	Director	mhubbar...	Non-Teaching
<input type="radio"/> Mother Hen	✓	Teacher	mhen@w...	Teaching
<input type="radio"/> Mother Goose	✓	Lead Teacher	mgoose@...	Teaching
<input type="radio"/> Jack Benimble	✓	Teacher Assistant	jbenimble...	Teaching

Have you completed all staffing updates? Once you hit submit you will not be able to go back.

2. The Program Staff Information wizard appears. This section should include the selected personnel for the facility (Administrative, Teaching, and Non-Teaching). Enter or select the applicable information for the staff member then click **Next**.



NC FAST

North Carolina Families Accessing
Services through Technology

Program Staff Information

* Staff Member's First Name

* Staff Member's Last Name

* Staff Member's Job Title

Staff Member's Email Address

* Type of Staff Member

--None--

* What position does the staff member serve in the program?

--None--

if you hold more than one position, identify the position you are most working

How long has the staff member worked at their current site? Please enter the month and year the staff member began working at your site.

* Month

* Year

*

What is the highest level of education the staff member has completed?

--None--

Next

Notes:

- Based on choices selected, additional information may be required to proceed to the next page.
 - When the educational level selected is post-secondary education (i.e., at least a NC Early Childhood Certificate or higher), additional fields will display.
3. The Program Staff Information - Continued page displays. Enter or select the applicable information then click **Next**.

Program Staff Information - Continued

* Staff member working hours
--None--

* What is the staff member's race?
American Indian or Alaska Native
Asian
Black or African American
Native Hawaiian or Pacific Islander
White

* What is the staff member's birth date?

* Is the staff member of Hispanic, Latino, or Spanish origin?
--None--

* What is the staff member's gender identity?
--None--

* What best describes the staff member's compensation as a teacher?
--None--

Monthly Information

* What is the staff member's rate of pay?

* How often do they get paid
--None--

* Does this staff member receive additional incentives (monetary or non monetary)
--None--

Previous **Next**

Notes:

- This section should include all full and part-time personnel for the facility (Administrative, Teaching, and Non-Teaching).
 - Expected payment amounts to employees should be rounded to the nearest cent.
 - If a personnel staff member has more than one role, select the one that is performed most often.
4. Program Staff Information page displays. This page displays the name and information for each program staff member added. Review the information for the newly added program staff member.
 5. Repeat steps 1-4 to add additional program staff members as needed.
 6. When updates for all employees are complete, click **Submit**.

Please [Click Here](#) to download a blank Staff Questionnaire document.
This can be printed and used to collect staff information, manually, from the employees.

Name	Active	Title	Email	Type	Position	Start Da...	Start Da...	Education	Educati...	B-K Lice...	Employ...
<input type="radio"/> Mother E Hubbard	✓	Director	mhubbar...	Non-Teaching	Owner	2016-05-01		Master's Degree or higher	PhD. Bioengineering	No	Full Time
<input type="radio"/> Mother Hen	✓	Teacher	mhen@w...	Teaching	Lead Teacher/Teacher	2016-08-01	2014-01-01	Bachelor's Degree	Early Childhood	Yes	Full Time
<input type="radio"/> Mother Goose	✓	Lead Teacher	mgoose@...	Teaching	Lead Teacher/Teacher	2011-10-01	1995-01-01	Master's Degree or higher	Early Childhood	Yes	Full Time
<input checked="" type="radio"/> Jack Benimble	✓	Teacher Assistant	jbenimble...	Teaching	Teacher Assistant	2018-05-01	2014-01-01	NC Early Childhood Certificate (12-18 semester hours of higher education)	Early Childhood		Part Time

[Add New Employee](#)
[Update Employee](#)
[Deactivate Employee](#)

[Previous](#)
[Submit](#)

Have you completed all staffing updates? Once you hit submit you will not be able to make any additional updates to your workforce.

[Return to Table of Contents](#)

Updating/ Deactivating an Employee

1. To update an employee's information, select the **Employee** radio button then click the **Update Employee** hyperlink.

Please [Click Here](#) to download a blank Staff Questionnaire document.
This can be printed and used to collect staff information, manually, from the employees.

Name	Active	Title	Email	Type	Position	Start Da...	Start Da...	Education	Educati...	B-K Lice...	Employ...
<input type="radio"/> Mother E Hubbard	✓	Director	mhubbar...	Non-Teaching	Owner	2016-05-01		Master's Degree or higher	PhD. Bioengineering	No	Full Time
<input type="radio"/> Mother Hen	✓	Teacher	mhen@w...	Teaching	Lead Teacher/Teacher	2016-08-01	2014-01-01	Bachelor's Degree	Early Childhood	Yes	Full Time
<input type="radio"/> Mother Goose	✓	Lead Teacher	mgoose@...	Teaching	Lead Teacher/Teacher	2011-10-01	1995-01-01	Master's Degree or higher	Early Childhood	Yes	Full Time
<input checked="" type="radio"/> Jack Benimble	✓	Teacher Assistant	jbenimble...	Teaching	Teacher Assistant	2018-05-01	2014-01-01	NC Early Childhood Certificate (12-18 semester hours of higher education)	Early Childhood		Part Time

[Add New Employee](#)
[Update Employee](#)
[Deactivate Employee](#)

[Previous](#)
[Submit](#)

Have you completed all staffing updates? Once you hit submit you will not be able to make any additional updates to your workforce.

2. The Program Staff Information wizard appears. This section should include all personnel for the facility (Administrative, Teaching, and Non-Teaching). Enter or select the applicable information for the staff member then click **Next**.

Program Staff Information

* Staff Member's First Name

* Staff Member's Last Name

* Staff Member's Job Title

Staff Member's Email Address

* Type of Staff Member

* What position does the staff member serve in the program?

if you hold more than one position, identify the position you are most working

How long has the staff member worked at their current site? Please enter the month and year the staff member began working at your site.

* Month

* Year

* What is the highest level of education the staff member has completed?

Next

- To Deactivate an employee's information, select the **Employee** radio button. Click the **Deactivate Employee** hyperlink.

Success
Completed: Deactivate Employee

Name	Active	Title	Email	Type	Position	Start Da...	Start Da...	Education	Educati...	B-K Lice
<input type="radio"/> Mother E Hubbard	✓	Director	✉ mhubbar...	Non-Teaching	Owner	2016-05-01		Master's Degree or higher	PhD. Bioengineering	No
<input type="radio"/> Mother Hen	✓	Teacher	✉ mhen@w...	Teaching	Lead Teacher/Teacher	2016-08-01	2014-01-01	Bachelor's Degree	Early Childhood	Yes
<input type="radio"/> Mother Goose	✓	Lead Teacher	✉ mgoose@...	Teaching	Lead Teacher/Teacher	2011-10-01	1995-01-01	Master's Degree or higher	Early Childhood	Yes
<input checked="" type="radio"/> Jack Benimble	✓	Teacher Assistant	✉ jbenimble...	Teaching	Teacher Assistant	2018-05-01	2014-01-01	NC Early Childhood Certificate (12-18 semester hours of higher education)	Early Childhood	

Add New Employee Update Employee Deactivate Employee

Have you completed all staffing updates? Once you hit submit you will not be able to make any additional updates to your workforce.

Submit

Notes:

- There will be a notification that the employee was successfully deactivated.
- The selected employee will still show on the Program Staff page but will not be counted as a staff member for the program.

4. When updates for all employees are complete, click **Submit**.

Please [Click Here](#) to download a blank Staff Questionnaire document.
This can be printed and used to collect staff information, manually, from the employees.

Name	Active	Title	Email	Type	Position	Start Da...	Start Da...	Education	Educati...	B-K Lice
<input type="radio"/> Mother E Hubbard	✓	Director	mhubbar...	Non-Teaching	Owner	2016-05-01		Master's Degree or higher	PhD. Bioengineering	No
<input type="radio"/> Mother Hen	✓	Teacher	mhen@w...	Teaching	Lead Teacher/Teacher	2016-08-01	2014-01-01	Bachelor's Degree	Early Childhood	Yes
<input type="radio"/> Mother Goose	✓	Lead Teacher	mgoose@...	Teaching	Lead Teacher/Teacher	2011-10-01	1995-01-01	Master's Degree or higher	Early Childhood	Yes
<input checked="" type="radio"/> Jack Benimble	✓	Teacher Assistant	jbenimble...	Teaching	Teacher Assistant	2018-05-01	2014-01-01	NC Early Childhood Certificate (12-18 semester hours of higher education)	Early Childhood	

[Add New Employee](#)
[Update Employee](#)
[Deactivate Employee](#)
[Submit](#)

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Submitted Updates

1. When the Stabilization Grant is updated, the application will display *Submitted* under the Status column.

Applications (3)

3 Items

Updated a few seconds ago

	Created By	Created Date	Last Modified Date	Status	Record Type	
1	<div><div></div><div></div></div>	10/28/2021, 9:00 AM	12/28/2021, 5:01 PM	Approved	Stabilization Grants - Initial Application	<div></div>
2	<div><div></div><div></div></div>	12/28/2021, 7:58 PM	12/29/2021, 4:08 PM	Submitted	Stabilization Grants - Monthly Updates	<div></div>
3	<div><div></div><div></div></div>	12/30/2021, 10:53 AM	1/3/2022, 8:20 AM	Submitted	Stabilization Grants - Quarterly Updates	<div></div>




View All

2. Thank you for Completing the Quartely Updates displays.

Thank you for Completing the Quartely Updates.

Notes:

- Some submissions may yield a *Pending* status after completion.

Applications (3) 3 items • Updated 9 minutes ago				
	Created By	Created Date	Last Modified Date	Status
1		10/28/2021, 9:00 AM	12/28/2021, 5:01 PM	Approved
2		12/28/2021, 7:58 PM	12/29/2021, 4:08 PM	Submitted
3		1/14/2022, 5:04 PM	1/14/2022, 7:02 PM	Pending

- This message will require additional follow up with a DCDEE customer service representative.
- A DCDEE staff member will contact you within five business days.


Thank you for completing the North Carolina American Rescue Plan Stabilization Grant Application. Your Stabilization Grant application has been received and additional information is needed. A customer service representative will contact you to resolve any outstanding issues.

Other Helpful Information

- Supported Browsers:
 - Chrome
 - Safari
 - Microsoft Edge or
 - Firefox.
 - Internet Explorer is not supported for this site.
- DCDEE Customer Service Unit at 1-800-859-0829 and select Option 2, (919) 814-6300, select option 2, or DCDEE_support@dhhs.nc.gov
- Please refer to “*Frequently Asked Questions*” for allowed uses of Fixed Cost grant funds. Find additional Stabilization Grant program guidance at <https://ncchildcare.ncdhhs.gov/Stabilization-Grants>.

Restarting the Application

- If the previous application was started in another browser or tab by a single user and was not closed, the following error message will appear.
 - This message will display when the same user tries to access the application in different tabs, browsers, or computers.




Your previous session expired due to the following reasons.

1. You have logged out of the portal before completing the application.
2. You have multiple tabs open for the benefits page at the same time.
3. You have logged into the portal from multiple computers at the same time.

Please click the 'Start New Session' button to start a new session

Start New Session

b. Click the **Start New Session** button.




Your previous session expired due to the following reasons.

1. You have logged out of the portal before completing the application.
2. You have multiple tabs open for the benefits page at the same time.
3. You have logged into the portal from multiple computers at the same time.

Please click the 'Start New Session' button to start a new session

Start New Session

- Any information that was entered on the previous opened application and saved, will remain on the application. All other information will be lost.
 - The application that was opened in the other tabs or browser will automatically close and a new session will start. [Click here](#) to proceed with completing the application.
2. If the previous application was started in another browser or tab by multiple users and was not closed, the following error message will appear.
- This message will display when multiple users try to access the same application in different tabs, computers, or browsers.



The Application is currently being worked on by [redacted] of 6/17/2022, 2:37 PM.
Please contact the [redacted] to check whether the application is still being worked on.

Please click the 'Claim Session' button to start working on the application.
Please note that by clicking the 'Claim Session' button any unsaved updates made by [redacted] will be lost.

Claim Session

b. Click the **Claim Session** button.

✓

✓

✓

Qtly Update Q3

Completed

The Application is currently being worked on by [redacted] of 6/17/2022, 2:37 PM.
Please contact the [redacted] to check whether the application is still being worked on.

Please click the 'Claim Session' button to start working on the application.
Please note that by clicking the 'Claim Session' button any unsaved updates made by [redacted] will be lost.

Claim Session

- c. Any information that was entered on the previous opened application and saved, will remain on the application. All other information will be lost.
- d. The application that was opened by the other users will automatically close and a new session will start. [Click here](#) to proceed with completing the application.

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DCDEE Fixed Cost Table

Fixed Cost/Family Grant Types	Category
Goods and services necessary to maintain or resume child care services.	Goods and services
Copayments and tuition payments for families with children enrolled in the program	Goods and services
Repayment of costs incurred after the declaration of the public health emergency on January 31, 2020, for any of the categories listed above	Goods and services
Mental health supports for children and employees	Mental health supports
PPE, cleaning and sanitation supplies and services, or training	Personal protective equipment

and professional development related to health and safety practices	
Teacher and staff recruitment	Personnel Costs
Teacher and staff compensation	Personnel Costs
Purchases of or updates to equipment and supplies to respond to COVID-19	Purchases of or updates to equipment and supplies
Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance	Rent/Mortgage/Utilities

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Downloading Documents

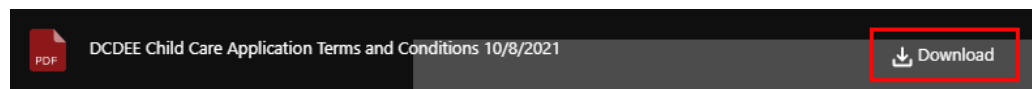
1. To download and print a copy of the North Carolina American Rescue Plan Stabilization Grant Application Terms and Conditions, click the **Click Here** hyperlink located on the COVID-19 Relief Funding Welcome page.

Contracting Agency for review prior to child enrollment.

- Please [Click Here](#) to download a blank copy of the North Carolina American Rescue Plan Stabilization Grant Application
- Please [Click Here](#) to download Terms and Conditions.
- Supported Browsers: Latest versions of Chrome, Safari, or Firefox. Internet Explorer is not supported

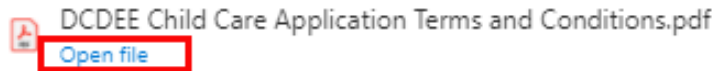
Note: This process can be used with any hyperlink to a document located on Provider Portal.

- a. The PDF file will display, click **Download**.

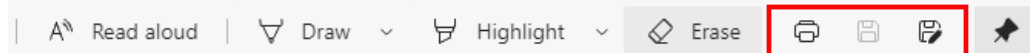


- b. The Download pop-up appears, click the **Open file** hyperlink.

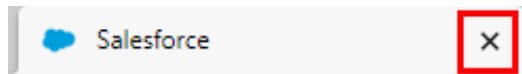
Downloads



- c. The document displays. Click the **Print** icon or the **Save** icon on the toolbar to *Print* or *Save* the file.



- d. Click **X** to close the PDF file.

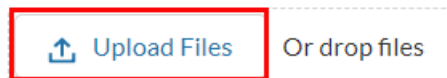


Note: Follow these steps to download any other document that is in this portal.

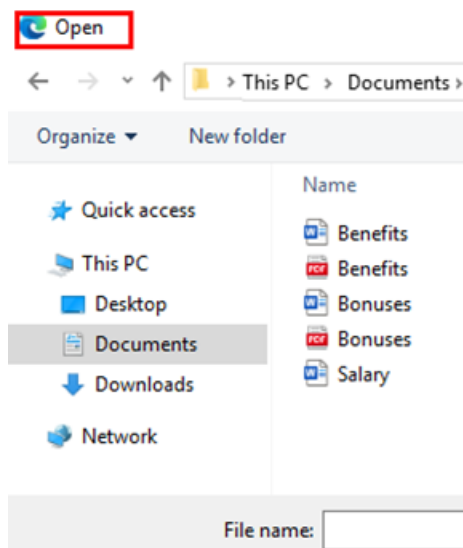
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Uploading a Document

1. Click the **Upload Files** hyperlink to upload documents.

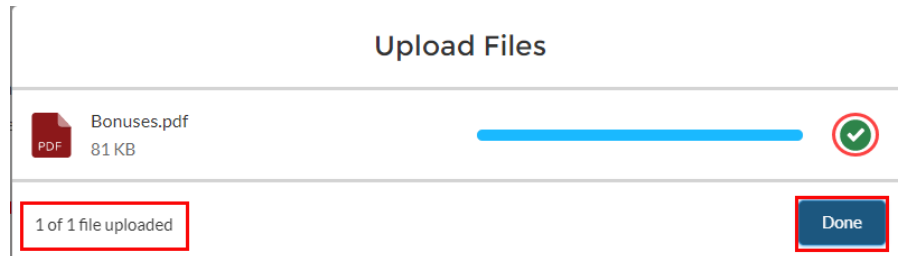


- a. The Open pop-up appears.

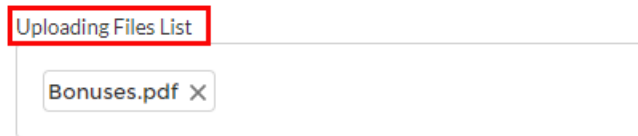


Note: A maximum of 5MB or 5000KB can be uploaded

- e. Click **Done** once the green checkmark displays and the file is uploaded.

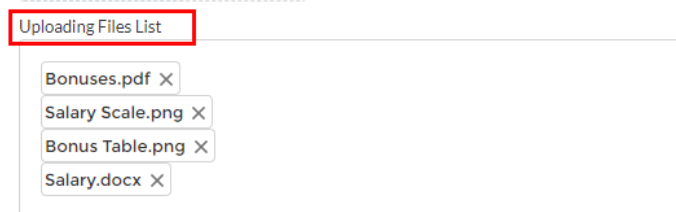


- f. The applicable file displays under the Uploaded Files List. Repeat steps 1 a-c as needed to upload all the files needed.



Notes:

- This can contain multiple files before saving the required documents.
- A maximum of 5,000 KB or 5MB can be uploaded.
- Larger files (>2.5MB) will take a longer time to upload.

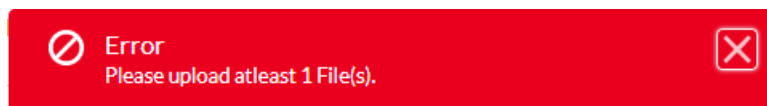


- g. Click **Save and Continue**.

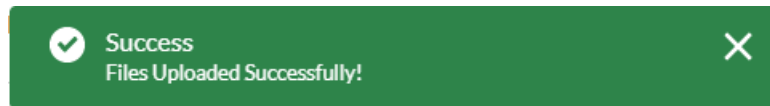


Notes:

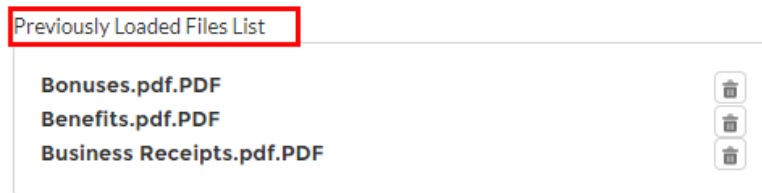
- All documents must be saved first to proceed to the next section.
- An error message will display when documents are not uploaded.



- h. The Success Files Uploaded Successfully pop-up appears. Click **X**.

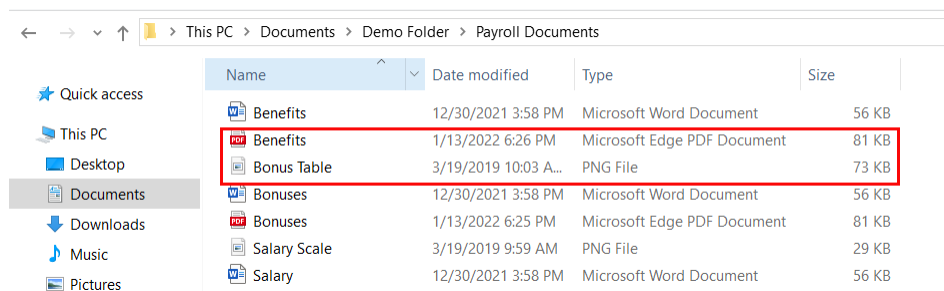


- i. The uploaded file will display in the Previously Loaded Files List.



Notes:

- Documents can only be uploaded to the Quarterly Update before submission.
- Once the **Submit** button is clicked on, your update is completed and cannot be changed without further assistance.
- If the **Submit** button is clicked on prior to uploading all documentation please contact the DCDEE Customer Service Unit at 1-800-859-0829, select Option 2, (919) 814-6300, select option 2, or DCDEE_support@dhhs.nc.gov
- Repeat steps 1 a-g as needed by clicking **Upload Files**, until all required documents are listed.
- PDF and PNG files are preferable to upload for documentation.



- If there are missing documents after submitting the update, contact the DCDEE Customer Service Unit at 1-800-859-0829, select option 2, or (919) 814-6300, select option 2, or DCDEE_support@dhhs.nc.gov for further assistance.

Removing an Uploaded Document

1. Locate the document file that needs to be removed listed under the Previously Loaded Files List.



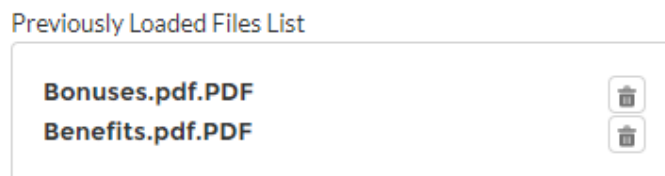
- a. Click the **Trash Can** button to delete the file.



- b. The Success File deleted successfully pop-up appears. Click **X**.



- c. The file is no longer listed and removed from the Previously Loaded Files List.



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